## **SUMMARY INFORMATION SHEET**

Name of Compa	any:
Contact Person:	
Company Addre	ess:
•	
Phone Number:	
Fax Number:	
Company's Fisc	cal Year End:
Annual Gross R	Levenues (most recent completed fiscal year:
	Expenditures (most recent completed fiscal year:
Company's Hor	me State:
	Information: (please check one)
(	Overhead rate is audited by state DOT or federal agency (please provide latest
8	nudit)
(	Overhead rate is audited by CPA and home state has issued a cognizant letter
(	please provide overhead rate audit and cognizant letter)
(	Overhead rate is not audited but detailed overhead rate schedule has been
Ċ	leveloped. (Please provide overhead rate schedule, income statement, balance
	sheet, general ledger account balances, tax returns and any other pertinent
	inancial information that supports the overhead schedule)
	,
Executive Com	pensation (please check one)
(	Compensation Analysis submitted and on file with home state
	Compensation Analysis completed but not filed with home state (please submit
	analysis, including all applicable supporting documentation such as salary survey
	nformation and any documentation supporting superior performance, if claimed)
	Compensation Analysis not completed
	I
If a com	nany has not completed a compansation analysis it will be required to submit

If a company has not completed a compensation analysis, it will be required to submit salary and wage information on its executives including, but not limited to, the top five highest paid executives of the firm. More details on the information that must be submitted can be found in the <u>Instructions for Compensation Analysis</u>. Companies that have not completed this analysis will be contacted by MoDOT's audit section which will provide instructions on how to submit the information.